medical missionary

JANUARY-FEBRUARY, 1964

Season of Epiphany

The very meaning of the word "epiphany" is manifestation. In this rich, warm season, God's glory appears in three signs: a star that leads wise-men to their King, Christ's baptism in the Jordan, the wedding feast at Cana. To enter deeply the spirit of this time, is to open wide the eyes of our hearts; to see and celebrate the single Mystery in these signs. It is to join the magi's caravan, to listen to the Father's voice, to *know* that this is *our* wedding feast with Christ! and rejoice in its wonderful wine. This is a season for seeing. Let us but SEE the star that shines on us, and we shall become it. The world needs our epiphany, for it is witnessing that makes us witnesses. It is seeing that makes us cry "SEE!"

Sr. M. Lawrence, S.C.M.M.

THE medical missionary

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Cover: Uganda's Independence Commemorated in Stamps.

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Challenges of the Sixties in East and West

This year we have an entirely new theme for the readers of the MEDICAL MISSIONARY MAGAZINE. We move to Africa—to Ghana, the first nation of the Dark Continent to win its independence (1957); to Uganda, the thirty-third and one of the most recent African countries to do the same (1962). Within the boundaries of these two countries, the Medical Mission Sisters operate four busy, expanding medical centers. Our theme for 1964: CHALLENGES OF THE SIXTIES IN THESE EAST AND WEST AFRICAN NATIONS.

Barbara Ward, the noted economist, predicted that in the whole world, "the breakthrough accomplished in the Fifties in weapons, in space research, in every type of scientific advance; the political breakthrough of a score of new nations; the emotional breakthrough of a third of humanity hungering for economic growth—all these forces would expand explosively to make the Sixties a period of challenge and change unequalled in human history."

Nowhere is this statement more true than in Africa which has been envisaged as one of the most decisive areas of the world for this decade. Africa's 220 million people live in a country four times the size of the United States. Great battles are being fought on her soil for men's minds and hearts. The challenges raised by Africa's sudden emergence into the modern world are as colossal as the continent itself and touch on every aspect of her national and international life—political, economic, social, educational, agricultural, spiritual. There are still millions of Africans—men, women, and children—who need and desire the means to conquer starvation, disease, and illiteracy.

It has been said that, since 1900, Africans have been trying to bridge a gap equivalent in the west to the period between Abraham and the space age. Africa did have her own cultures, customs and languages, societies and hierarchies before the Europeans arrived on the scene. But it was not until the 15th century that the Portuguese caravels ventured along the whole coastline—west, south, and east. Then came the Dutch, English, and French in turn, touching the coasts in their quest for Indian gold. From the 16th century on, coastal Africans were to meet Europeans as traders—in ivory and slaves—or as isolated missionaries. The first Catholic missionaries to make a permanent settlement along the Gold Coast (Ghana today) arrived in 1872. Seven years later, in 1879, Father Lourdel, a White Father, entered Uganda. Today Uganda has the fastest growth of Christianity on the continent. Approximately 30% of the population is Catholic. Ghanaian Catholics number 10% of the population.

The fundamental changes or challenges now facing and transforming African societies are mainly due to what is called the "western impact" and they are extremely complex. This expression connotes the whole process of intermingling and interaction of western contact with African societies and cultures: the institutions, ideas and values

which characterize our western culture and heritage; freedom and liberty under a democratic government; progress through science and education; the importance of the individual rather than the tribe or clan; industrialization.

These countries struggle to modernize and to bring a better way of life to their people in the quickest way possible. Their leaders are determined to control their own political destiny, choose their own friends, develop their own personality and, while taking a responsible position in world affairs, align themselves with no other foreign power. That Africa's economic weaknesses and problems provide ample opportunities for Communist penetration is well known.

In the 1964 issues of the MEDICAL MISSIONARY MAGAZINE we intend to focus our attention on "these challenges of the Sixties" as they affect our medical mission apostolate in Ghana and Uganda and as our apostolate, in turn, exerts an influence on them.

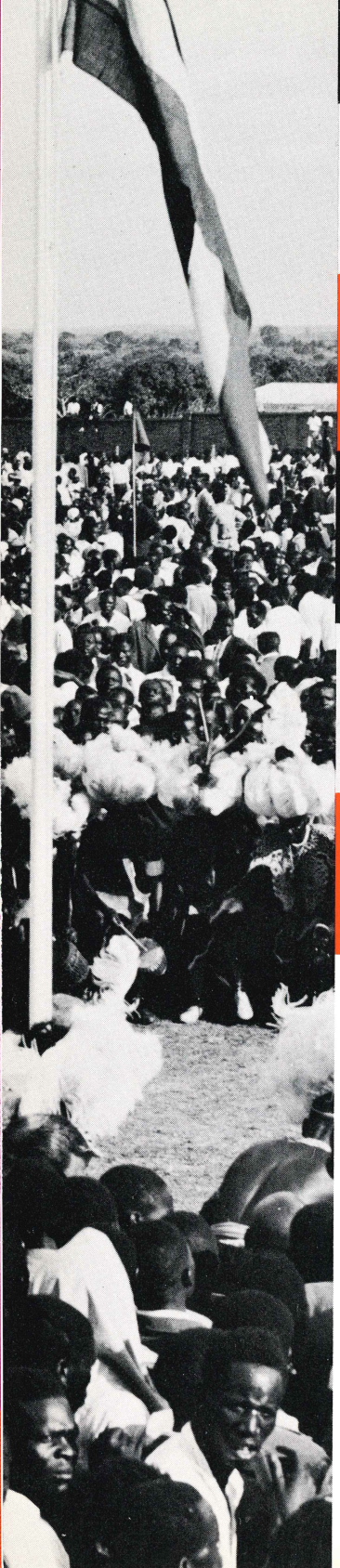
You may well ask at this point, what has the medical mission apostolate to do with these challenges—with economics, independence, leadership, education, family life, rural development? The medical mission apostolate in Holy Family Hospital, Fort Portal, Uganda, or in our bush hospital in Techiman, Ghana, embraces much more than just caring for the sick who come to the hospital doors. It reaches out into every facet of the lives of our patients and their families.

If drought lays waste the cocoa crop in Ghana, Kwasi's family may not eat for some time and falls easy prey to the deadly Blackwater fever. If Birungi, a coffee plantation worker in Uganda, brings his wife to Holy Family Hospital to have her latest baby, the child may have a chance to live 50 years. Birungi himself can only hope to live 37 years, the life expectancy in Uganda today. Modern science and technology bring benefits too essential for any people to overlook.

In 1958, Kwame Nkrumah, President of Ghana, predicted that "once Africa is free and independent, we shall see a flowering of the human spirit second to none . . . We want, therefore, to develop our own community and an African personality. Others may feel they have evolved the very best way of life, but we are not bound like slavish imitators to accept it as our mould. . . ."

For the Christian the true flowering of the human spirit is to give each man the reverence, respect and dignity due him as a child of God. Every man is made in the image and likeness of God. The Church is the "true father-land of all souls". . . and not until all nations have entered its doors will the Mystical Body of Christ be complete.

We must approach each nation with a reverence and respect for its particular traditions, culture, and customs. We must come to serve, to help where help is needed, to love in Christ. Medical Mission Sisters consider it a privilege as well as a challenge to have part in Africa's struggle for freedom and its true African personality.



Uganda flag, Independence Day celebrations.

Two big events happened in Uganda in the Fall of 1962. Uhuru, the nation's independence, occurred on October 9th and received widespread publicity throughout Africa and the world. A little noted event, but one of great significance, occurred in September. That was the arrival of the first contingent of Medical Mission Sisters in Fort Portal. I had the happy privilege of being there when both events took place.

As the lay secretary to the Most Reverend Vincent J. McCauley, C.S.C., Bishop of Fort Portal, my ringside seat for the Uhuru (Swahili word for in-

UHURU

and the Medical Mission Sisters Come To UGANDA

by Richard F. Long

These Independence Celebration decorations are the symbols of the administrative areas of the Northern, Eastern, and Western Regions and the Kingdom of Buganda, together with the Shield from the Uganda Coat of Arms.

dependence) celebrations was assured. The Bishop had a busy day October 9th. In the morning he attended and gave an address at the independence celebrations in Fort Portal. Then, in the company of Father James Donahue, C.S.C., of New York City and myself, he took the long drive to Kampala, the nation's capital. Later that evening with Uganda's Archbishop Joseph Kiwanuka, he boarded a jet plane to Rome and the Vatican Council. All in all it was quite a day for the "Bush Bishop" of Uganda.

Those who have been to Fort Portal realize why Winston Churchill called Uganda the "Pearl of Africa." This little community of Africans, Asians, Europeans and Americans, rests in the foothills of the Ruwenzoris or Mountains of the Moon. This is the most important range of snow mountains in Africa and they form a natural boundary line between Uganda and the Congo. Fifty miles south of Fort Portal is the equator line. But there is no worry about oppressive heat here. Those snow-capped peaks, topped by Mount Margherita (16,974 feet) act as a natural air conditioner and give a continually pleasant climate ranging between 70 and 80 degrees year round.

Add to this already colorful setting the picture of little African children(of the Batoro, Baamba and Bakonjo tribes) waving the new black, gold and red Uganda flag and you have some idea of "Independence Day" in Fort Portal. One of the arches leading to the village that day said: "Goodbye Our Beloved Queen," and, on the reverse side, "Welcome Our Beloved Obote." The "goodbye" was to Queen Elizabeth because Uganda was a British possession. The "Obote" referred to is the new African Prime Minister, Milton Obote.

The ride to Kampala was especially interesting that day and we didn't seem to mind the long, winding, dusty road that has been called the "Merry Go Round" because of its more than 200 curves within 200 miles. Everywhere the people were waving the new flag and we passed through innumerable, flower-bedecked arches proclaiming independence. Often you would hear the shrill cry "Uhuru" — as only the African can pronounce that word. It was like being around on the first Fourth of July, minus the firecrackers.

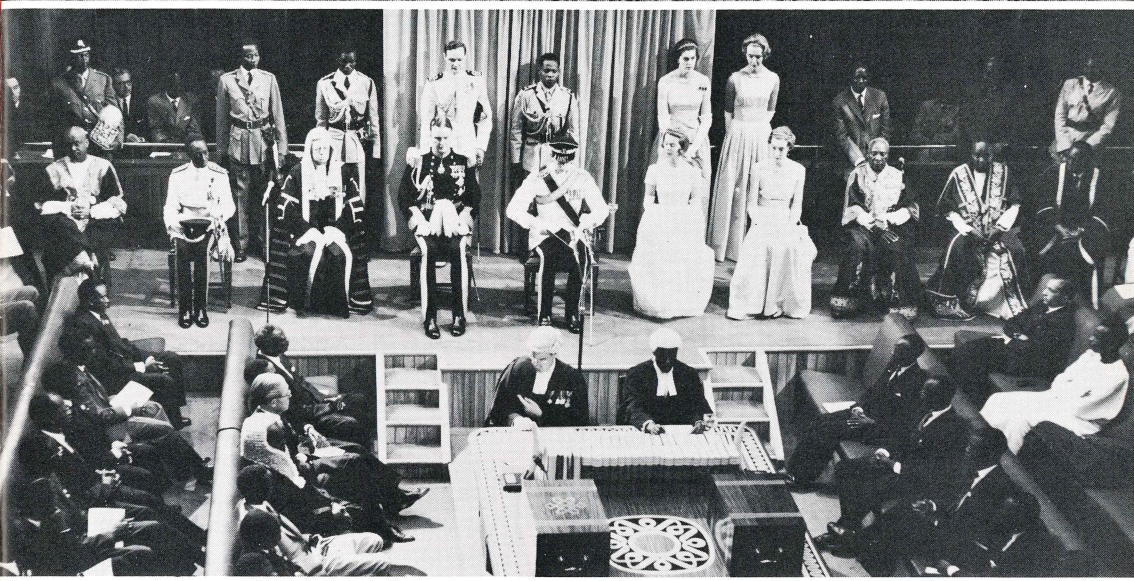
Kampala (about 50,000 population) is one of the most beautiful and modern cities of Africa. It likes to compare itself to Rome with its seven major hills. The cosmopolitan and religious nature of the city are expressed by these hills which are topped by a Catholic and Protestant cathedral, a Mohammedan mosque, a Hindu temple and the palace of the Kabaka, Uganda's leading king, who is now president of Uganda.

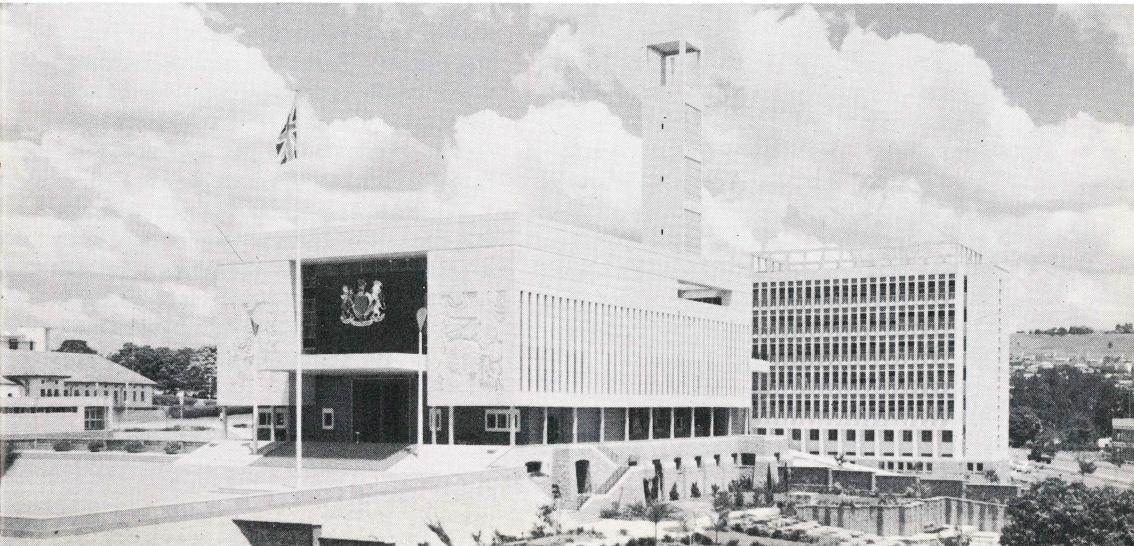
We arrived in time to see some of the ceremonies at the parliament building, a striking, modern, white structure gleaming in the mid-day sun. The scene was a treat for the eyes. Many of the African heads of state were there plus representatives from many other countries. Especially noteworthy,

The foothills of the Ruwenzori or "Mountains of the Moon" are within sight of Holy Family Hospital in western Uganda.

State opening of the Uganda Parliament. The Omukama of Toro and Kabaka of Buganda are seated on far left of dais, the Omukama of Bunyoro and Omugabe of Ankole on the right. The Duke of Kent presided.

The National Assembly building in Kampala, Uganda's capital.





as they walked up the steps of the parliament building, were the flowing robes of the Nigerian and Ghanaian representatives; the beaded cap and fly whisk of Jomo Kenyatta (now prime minister of neighboring Kenya); former Senator Benjamin Smith of Massachusetts, the representative of the United States President and the pomp and ceremony attending the arrival of the Kabaka and the Duke and Duchess of Kent, the representatives of Queen Elizabeth.

It was interesting later to hear the comments of one of the newspapermen reporting the event for a wire service. He had been at most of the independence ceremonies in Africa in the past several years.

"This is the quietest independence I have ever covered. These people certainly take things calmly," he said.

The remark, we thought, was a compliment to the orderliness of the ceremonies and an insight into the nature of the Ugandans. Not one racial incident or violent act marred the celebrations. This was noteworthy when it is considered alongside of the terror and disruption caused in some newly-independent countries.

Ugandans, on the whole, are a friendly, peaceful people. Their personalities are mild and quiet in comparison to the more exuberant, outgoing natures of the West Africans. There has been little history of racial strife here in comparison to that which has beset, for example, the Congo and Kenya. Uganda's quiet independence brought admiration from a world that is weary of cold wars and constant turmoil.

After a short stay in Kampala it was good to return to Fort Portal. Kampala is modern Africa, offering all of the conveniences that would be found in an American city.

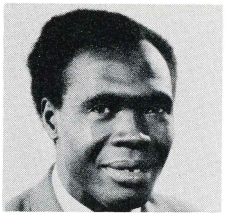
The Fort Portal area is the Africa you read about . . . the Africa of the bush country; great plains filled with wild elephants; the tin-roofed mud huts with the grass burned in front to keep the snakes away; the land of the professional white hunter; the place where a variety of tribes can be found—from the giant Watusi (some are seven feet!) to the small Pygmies, who have been driven into the forests. It was always good to round the last dusty turn and see the Mountains of the Moon in the distance, meaning we were only a few miles from Fort Portal. This is the type of country where the Medical Mission Sisters arrived in September of 1962.

Despite its picturesqueness, Fort Portal presents some serious medical challenges. The type of diseases treated by the Sisters at the hospital include malaria, leprosy, tuberculosis, sleeping sickness, bilharziasis and a variety of illnesses caused by malnutrition. The people here eat matoke, a banana-type food that lacks the proteins needed to produce a strong, healthy constitution.

Beyond those Mountains of the Moon, via a cliff-hanging dirt road, is Bwamba, an area where 65,000 Africans are without medical treatment. Since their arrival the Sisters have made several medical safaris to Bwamba. In Bwamba are found two main tribes, the Baamba and the Bakonjo, and a scattering of the Pygmies, who inhabit the vast Ituri Forest of the Congo which spreads into Uganda at this point. There have been tribal wars in this area in recent months, with the Baamba and Bakonjo fighting the Batoro.

While bending down to treat the Pygmies, the Sisters have to look up to treat the Watusis, the African giants.

The Watusis, a regal-looking cattle tribe, are recent exiles from their homeland to the south, Ruanda. When in-



Mr. Milton Obote, Prime Minister of Uganda.

dependence came to Ruanda the more numerous Bahutu tribe forced their former rulers, the Watusi to leave the country. The Watusi fled to Uganda and the Congo.

About 40 miles south of Fort Portal there is a settlement of Watutsi. The Holy Cross Fathers have started a mission at this settlement, Kibale, and a priest makes a safari there every two weeks. Recently a group of Medical Mission Sisters brought needed medical help when they visited there. More medical safaris, in the future, are planned to aid the Watusi in Kibale.

When Mother M. Benedict visited Uganda in Christmas of 1962, she remarked that it "will be an almost greater challenge to make this hospital into a modern medical facility than it would be to build a new hospital." The reason for the difficulty lies in the fact that the hospital grew like Topsy from a small dispensary, and the present buildings are no longer adequate for the numbers who come for help. This is the first time the Sisters ever took over a hospital. They usually start from scratch.

The Sisters' concern for Uganda will soon be reflected in one of the best possible ways. A nursing school, under the direction of the Sisters, is expected to open before long. It will be the first nursing school in the whole of Western Uganda.

The people of Fort Portal were very happy to see the Sisters come. As an old African man, recently released from the hospital, said: "Webale Ruhanga," which means, generally translated from Rutoro, the local language: "Thank God, they are here."

These Pygmy people live in the Bwamba area of Uganda.

Sister M. Dorothy talks with out-patients on the veranda of Holy Family Hospital. Fort Portal.

The old and new Ghana meet in this confrontation of Chief and Commissioner.

fast changing

An Interview

Sister M. Paula, home on furlough from Ghana, West Africa, agreed to answer some questions on a country and people she knows well. From 1948 to 1952, when Ghana was still the Gold Coast and independence had not stirred the Dark Continent, Sister Paula and two other Sisters pioneered the Medical Mission Sisters' first medical center in Africa, Holy Family Dispensary in Berekum, 300 miles inland from the capital and 150 miles from the nearest big city. In 1955, after a tour of duty in South America, Sister Paula returned once again to Africa and her nurse-midwifery work among the Ashanti people. The Gold Coast became independent Ghana in 1957. New political leaders took precedence over tribal chiefs. Industry and education moved into this small area with a new impact and momentum. From one who knew the before and after, who was there when independent Ghana was born, and who has seen her Society's medical work in the country take root and spread, the following observations are worth considering.

Q. "Sister Paula, we hear so much about 'independent' Africa, about the new, young government in Ghana, about change. Has all this affected village life in Berekum as you know it?"

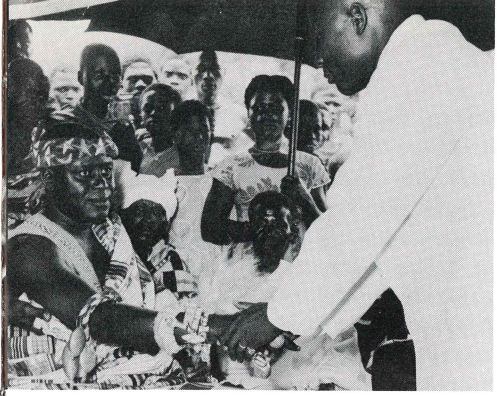
A. "It inevitably has. Probably the most notable change in the village is the presence of the commissioner, a government official who has taken over the authority of the old tribal chief—at least, in the more important areas of control. Before independence, when Ghana was still the Gold Coast, each chief had full control in his village. The people looked to him for everything, from spiritual guidance and counsel to the more prosaic disputes over land boundaries. With the birth of Ghana in 1957, this all changed. The country was divided into regions with a regional commissioner erected as the governing authority. Each region, in turn, was further broken down into districts and a commissioner appointed for each district."

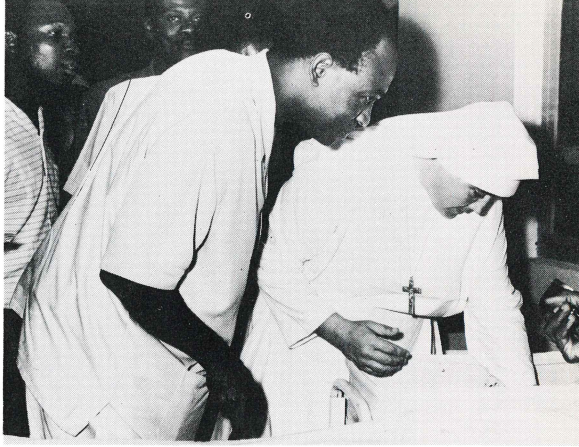
Q. "But were the chiefs uprooted overnight and rejected by the people?"

A. "Oh no, a semblance of the 'traditional government' was maintained in the new set-up. In fact, I heard one Ghanaian observer say this was the only way the new government could hope to gain control. Those chiefs who were in sympathy with the new regime's policies were allowed to retain their positions and 'unsympathetic' chiefs were replaced. This way the people still felt the presence of the chief and could go to him but the actual governing power was solely in the hands of the commissioner. His official stamp must appear on everything before action will be taken."

Q. "Most of your patients around Berekum are cocoa planters. Has Kwame Nkrumah's nationalization of the industry altered their lives?"

A. "Well, the people have had to make





Sister M. Paula shows a baby in a crib to Kwame Nkrumah and officials, during a tour of Holy Family Hospital, Berekum.

GHANA:

with Sister M. Paula

by Sister M. Pierre

big adaptations in their thinking to conform to his regulations. Previously, the cocoa planters dealt directly with the buyer. Now they must sell their crop to the Government and a tax is levied on each bag. In the past there was no such thing as taxes. Also, the bags in which the cocoa is packaged were always supplied gratis by the European firms. In the new set-up, the planters have to buy their own bags, a pretty sizeable expense for them. The cocoa world market, too, has dropped. All of this means less cash in hand for the planters and to a certain extent, has stirred up a kind of resentment among them. They don't 'feel to grow it' any longer, as one of the nurses expressed it to me. However, the government has given visible proof of its desire to advance the industry. Huge storage sheds for the harvested cocoa bean have been put up and the IOU's which were issued in the early days to the planters when there was no ready cash in the new government's till, have since been made good. Despite the ups and downs, the people seem to be making out all right."

Q. "Government taxation and saving are new to the people, aren't they, Sister? Have they accepted it as a necessary means to development or has this, too, caused resentment?"

A. "I don't think resentment is the proper word. Their carefree nature and simple way of life have not prepared the Ghanaians for the idea of saving for the future. They would rather enjoy their benefits today and not worry too much about tomorrow. When money is deducted from their salary, they don't *really* believe that they will ever see it again. With this in mind, who can blame them for being reluctant?"

Q. "How did our own hospital employees react to some of the new Government measures?"

A. "Like the rest of the country, our workers want to keep abreast with everything that is going on. When the new government first presented its ideas to them, they were hesitant and justifiably suspicious. For example, with regard to unions, most of the people were dismayed and confused. They were unhappy about paying union dues.

Sister M. Paula discusses the cocoa crop with a local farmer.

Eventually, they came to realize that there were some benefits and that the wisest thing to do would be to go along with the new policy."

Q. "All this ferment and emphasis on independence must surely appeal to the young people of Ghana more than to the older ones. Has this created tensions between the groups?"

A. "Most assuredly. The young people are learning new ways, different outlooks, changes from the traditional patterns. Much of this bewilders their parents. They don't know what to make of it. True, they want progress. But they would never dream of doing the things that the younger people are doing. We notice it in our pre-natal work, for instance. The old grannies object vehemently when the young women want to stay near the hospital as delivery time draws near instead of going back into their mother's village, deep into the bush. The Government public health nurses have the same problem as we do in this area, trying to convince the older women that the hospital is by far the best place for the young women to go when their time is due."

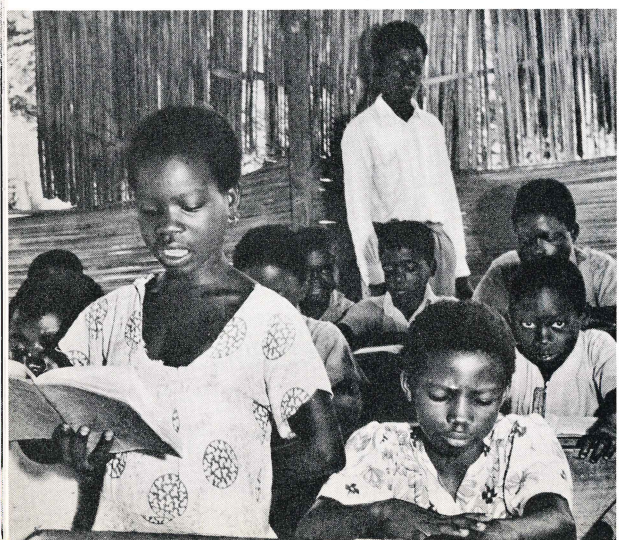
Q. "Are many of the people interested in obtaining an education, Sister Paula?"

A. "To say that they are interested is a very mild way of putting it. There is an absolute clamor for education. A good many people in the coastal cities have been fortunate enough to go to school and there has always been a steady stream of people from this part of West Africa going abroad for education. The biggest difference today is one of numbers—so many, many more realizing the advantages of education and wanting it for themselves and for their children."

Q. "Do most of the villages now have their own schools?"

A. "The great majority do. But education has been nationalized and all

There is an absolute clamor for education in Ghana. Almost every village has its own school.



Ghanaian housewife shops—supermarket style—in the cities, Accra and Kumasi.

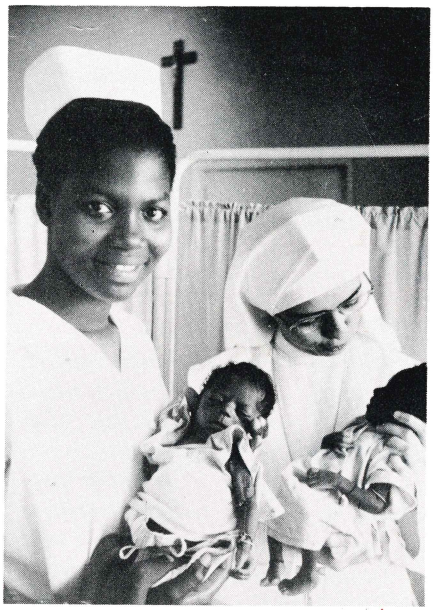
schools are regulated by the Government. From the very beginning Nkrumah has been an advocate of free education for all children and an Education Trust was organized early to make this possible. According to this, the Government not only provides the school buildings, but also regulates the school schedule, decides on the text books, provides the school uniform, and so on. No new school may even be erected without the Government's explicit permission. The Government has become the sole guardian of the system."

Q. "What would you say of our own medical work today in Ghana, Sister? You have known it from the very beginning."

A. "Well, certainly the people are coming much more readily to the hospital. Most Ghanaians just have to know that there is something available and they will come! They shop around, too, to make sure that they are getting the best thing going. In the beginning, we had trouble convincing the mothers to leave their babies with us. We had to allow them to stay to see how we would take care of their children. Now it is difficult to get them to take their babies home!"

Q. "What would you consider to be the biggest contribution of Holy Family Hospital, Berekum, to Ghana's future well-being?"

A. "I can answer that without a moment's hesitation — our nurses' training program. It has been a hard struggle to get it established and recognized, but at last we are over the hump. One of the biggest problems in the beginning was to find suitable candidates. Very few of our local Ashanti girls had the necessary education. Even now, most of our students come from the coast—and this is really something.



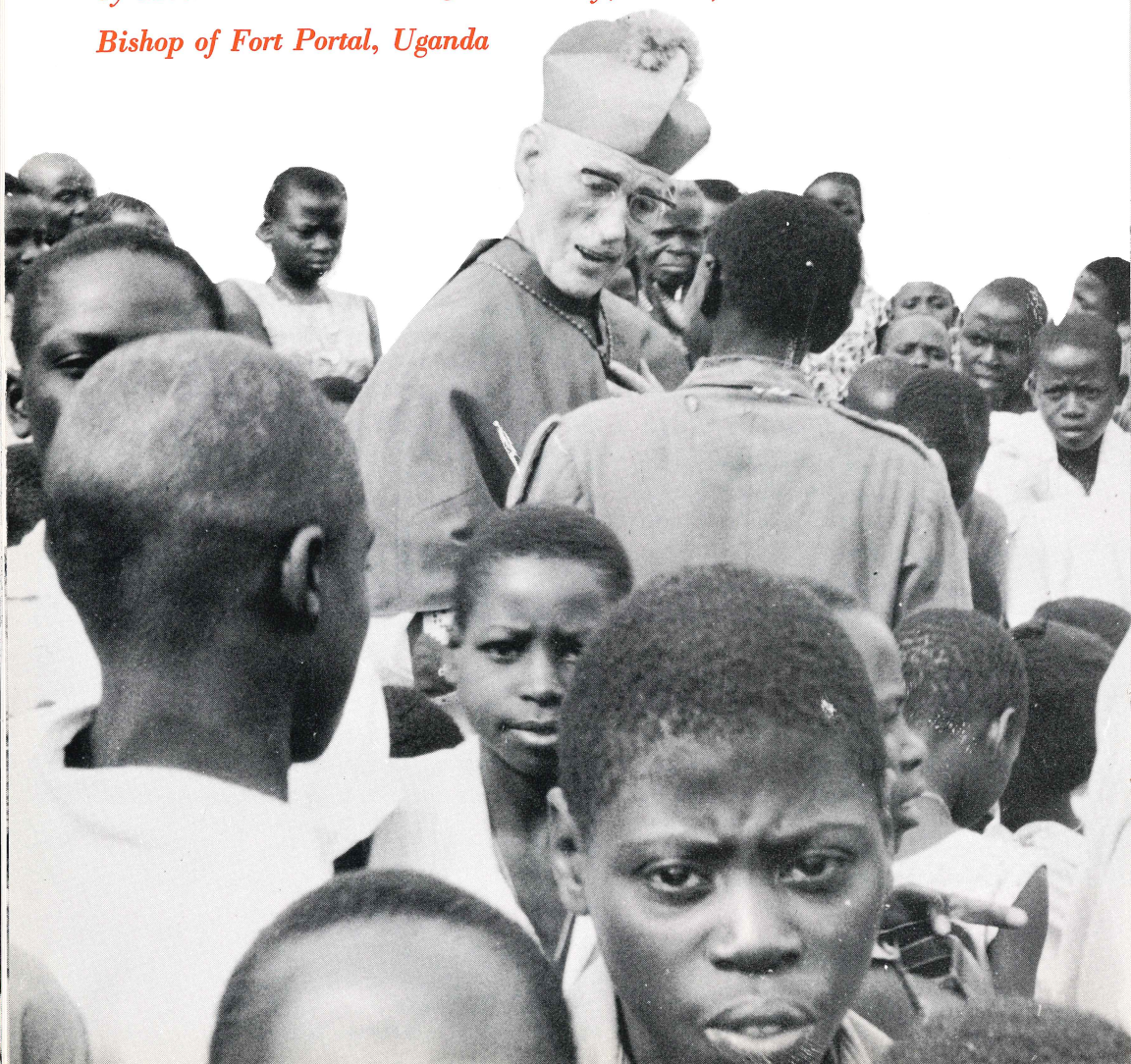
Sister Jude Marie, R.N., shares the responsibility of caring for these twins with Miss Bio, R.N., graduate of Holy Family Hospital's Nurses' Training School in Berekum.

Usually, girls from the village go to the big cities for professional training, but in our case, the girls from the coast are coming 300 miles into the bush to take training with us. These girls have had more contact with the outside world and are more accustomed to hard work. I heard one of the young ladies from a nearby village admire our nurses. She had been in the hospital for surgery and her comment was, 'My, they work hard. I could never do it.' There is some truth in that statement. The Ashanti people really can't work too hard—probably because they have never had to. They have always had the security of their cocoa farms. The people of the coastal region have not."

"From your words and tone of voice, Sister Paula, there is no need to ask if you are eager to return to your work. May you continue to serve Ghana and its people for many years to come."

THE CHURCH'S RESPONSE TO THE CHALLENGE OF INDEPENDENCE IN UGANDA

by Most Reverend Vincent J. McCauley, C.S.C.,
Bishop of Fort Portal, Uganda



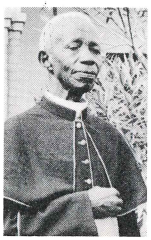
Winston Churchill called Uganda the "Pearl of Africa." The Popes have called it the "Pearl of the Missions." It deserves both high appellations.

The visitor to Uganda, by air, who has left the parched desert lands of Egypt and the Sudan behind him, feels his spirits lift as his plane glides over the great, blue expanse of Lake Victoria and he sees this rich, green land below him. From Lake Victoria, where the Nile begins its flow, to the snow-capped Ruwenzori Mountains, where the Diocese of Fort Portal is located, Uganda is truly a beautiful land.

The visitor also notices something else. Uganda is a land that is dotted with churches, schools and seminaries—quite a tribute to the early Christian missionaries and also to the missionaries of the present day who are still hard at work here.

In the short space of 80 years (the first missionaries arrived in the late 1870's) Uganda has become a Christian country. It is considered to have had the fastest growth of Christianity on the African continent. More than 30 percent of the 6,800,000 people are Catholic and more than 25 percent are Protestant.

The Catholic Church's greatest response to nationalism in Uganda has been to create an African hierarchy (a Cardinal and an Archbishop), African bishops, priests, nuns and brothers.

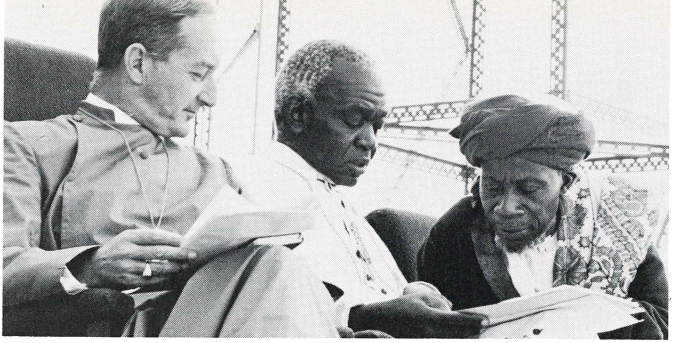


Father Victore Mukasa, the first priest of central Africa, recently celebrated the golden jubilee of his ordination.

A visit to the historic White Father mission at Villa Maria, near Masaka, and to its adjoining seminary, Katigondo, points up the dynamism of the Faith in Uganda. Here at this humble bush mission, surrounded by banana plantations, Father Victoro Mukasa, the first African priest of modern times, studied for the priesthood. On April 21 of this year, in a splendid ceremony at Villa Maria, Father Mukasa celebrated his golden jubilee in the priesthood.

So, fifty years before the term "Africanization" became popular, the Catholic Church in Uganda was turning out African priests. This number of priests has now swelled into the hundreds.

Villa Maria and its seminary, Katigondo, have made some other remarkable contributions to the Faith in Uganda and Africa. Here it was that Laurian Cardinal Rugamba, the first African



Most Rev. Joseph Kiwanuka (center) conversing with Archbishop Leslie Brown, head of the Anglican Church in Uganda and the Muslim Sheik Kulumba. Their respective churches are represented on the Independence issue postage stamp below.

Prince of the Church, and Bishop of Bukoba, Tanganyika, received his training for the priesthood.

The first African Bishop of modern times, the Most Reverend Joseph Kiwanuka, the Archbishop of Rugaga (near Kampala, the main city) was trained for the priesthood at Katigondo.

There are five orders of African nuns and there are African brothers in several orders in Uganda.

This response of the Church in Uganda to nationalism continues to go on. In the Fall of 1962, I was most happy to welcome the Medical Mission Sisters to my Diocese on the Uganda-Congo border.

The Medical Mission Sisters will soon initiate a program to train African nurses. As there is not one training center for nurses in the whole of Western Uganda, this surely will be a most welcome and important work to the future health and

growth of the country.

This, then, is a short resume of the response of the Church, in some areas, to nationalism in Uganda.

In addition, practically all of the members of government in Uganda, Tanganyika and Kenya, have been educated by either the Catholic or Protestant missionaries.

Uganda is probably the best example of this influence of the Christian missionaries in education. More than 90 per cent of the schools in Uganda (primary and secondary) are under the direction of the Christian missionaries.

Prime Minister Milton Obote of Uganda is a product of the Protestant mission at Lira. Five governmental ministers in the new nation were educated at Catholic mission schools. President Julius Nyerere of Tanganyika was educated by the White Fathers. Tom Mboya, a leader in the new Kenya government was educated by the Holy Ghost Fathers.

The Uganda martyrs, most of whom died for the Faith in 1885, were the first fruits of the missionary endeavour, whose sacrifice is surely responsible for the rapid development of the Faith in Uganda.

In spite of this tremendous growth the Church has big problems. Elements of this independence that has swept Africa have shown definite materialistic and opportunistic trends.

African young women are serving Christ and His Church in independent Uganda.

It is quite obvious that the dominant fear which was inherited from the old tribal culture continues to motivate much of the nationalism of the present. This element of fear dominates the response of Africans to politics.

This fear is shown in the extreme sensitivity of some African politicians to any sort of criticism—even very constructive criticism. It is shown in the trend towards one-party rule—a rule that sometimes suppresses such basic rights as freedom of religion, free speech, free press, the right of assembly.

In these turbulent times in Africa the Church, which, paradoxically, has educated, mentally and spiritually, much of Africa, comes under attack from these nationalists.

Actually a deeper penetration of the Catholic spirit is something that has to be developed. We have made a start but there is much work to be done. The Apostolate in these new nations involves far more than catechizing and baptizing.

As these nations become independent, more and more responsibility for education and social services falls into their hands. There must be established in the minds of the people a Catholic sociological thought—the Catholic teaching on labor, business and sociology and allied fields.

The Africans are entering into an independent state for the first time and there is a great struggle for their minds. Materialism and opportunism have made great strides already.

The Church will have to devise new approaches in her effort to Christianize the way a man lives personally and socially.

Sister M. Amata supervises the preparation of medications at Holy Family Hospital's nursing station, Fort Portal, Uganda.

BRIEF BRIGHT STAR

by Sister M. Raphael

Stella came into our lives with a Singer sewing machine (table model) balanced on her head. It was midnight. She glided onto the cement veranda, called a soft "kokoko," the verbal knock, and waited there in the moonlight, surrounded by sleeping mat, mosquito net, "chop box," cooking pots and clothing—enough personal possessions to set up light housekeeping on the spot.

We were expecting a certain Comfort Owusu, a young woman from Konongo, a gold mining town some 200 miles away. Comfort was to be a nurse's aide, our only definite response to newspaper notices of openings for dispensary assistants. In those early days of our work in Africa in 1948, before our nursing school at Holy Family Hospital became a reality, we three Medical Mission Sisters were continually in need of aides. Comfort was a hope on the horizon. Her husband had handled all the correspondence and assured us that she was intelligent, highly qualified, and spoke English well. It sounded too good to be true, but we needed help urgently. She was hired sight unseen.

This new arrival must be Comfort. I asked: "What do you want?"—the polite and customary sequel to the first words of greeting. The newcomer replied quite simply: "I have come."

"You are Comfort?"

"No, I am Stella. I have come to work here."

"But mame, I don't know you. Where are you from?"

"Konongo."

Aha, she must be a substitute for Comfort.

"Do you know Comfort Owusu?"

"I never knew her."

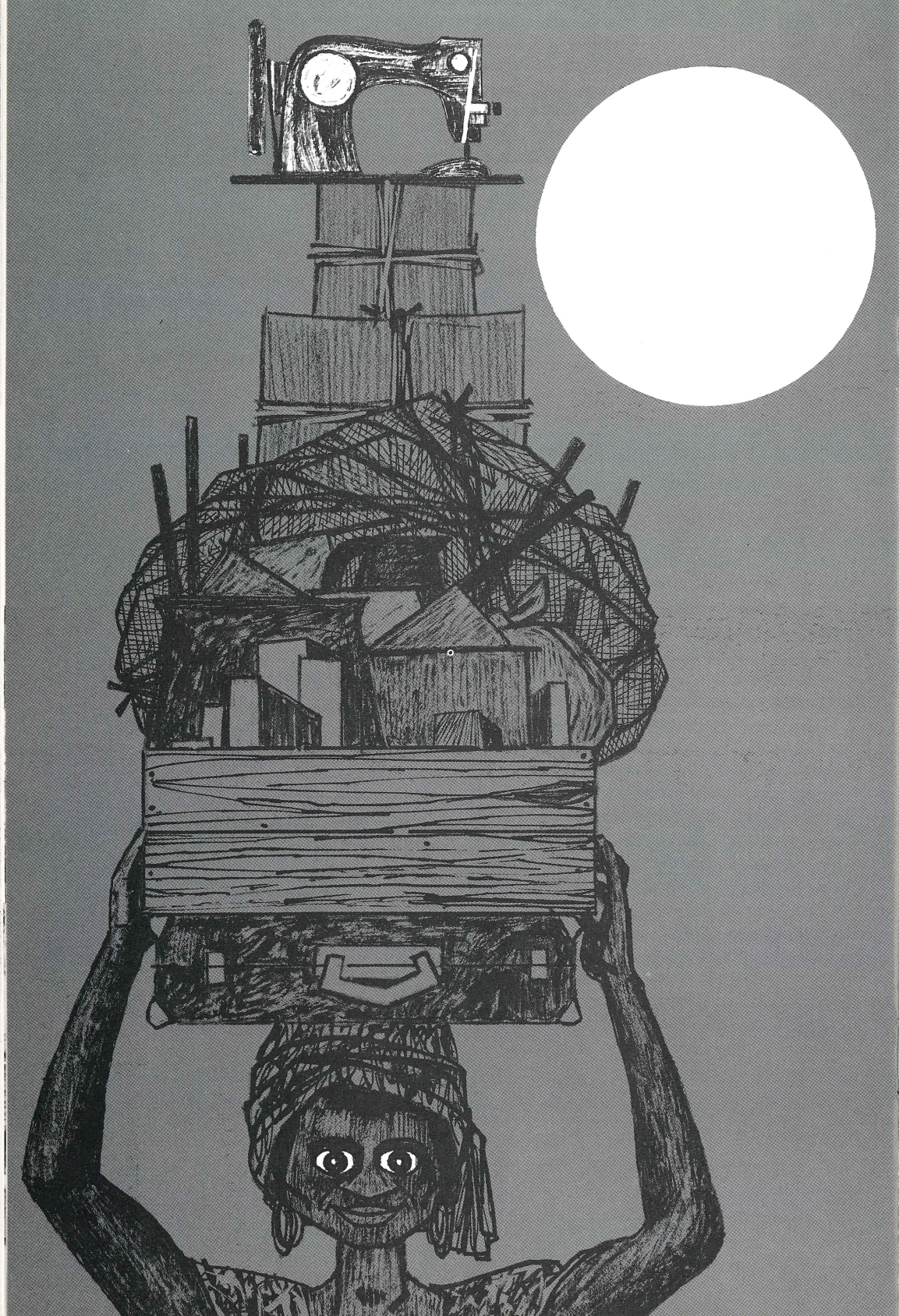
The change in tense was a bit unnerving, a first indication that the English being used was not necessarily completely understood.

"But I did not send for you! I do not know you."

"It doesn't matter," she assured me graciously and began to shift the sewing machine from her head. As I assisted her, I mused that, after all, I knew no more about Comfort than her husband's recommendations. Moreover, Comfort had not materialized. Stella was an accomplished fact. I agreed . . . it did not matter.

The next morning Stella was up early. I greeted her as I hurried over to the dispensary to get the pharmacy set up before the crowds of patients began to arrive. In passing, I told her that I would see her later in the morning to discuss her work and living arrangements.

It was a busy clinic day and by midmorning, the veranda was thronging with patients anxious to be seen by the "dokoter." Suddenly, an energetic woman stiffly starched in an immaculate white uniform and sun helmet strode into the pharmacy. "Good morning, mame, what can I do for you?" I asked, as I gently tried to steer her out of the work area. She was not to be steered.



"I work here."

"You work here? But . . ." I peered under the sun helmet and, sure enough, it was Stella.

I suggested she remove her helmet (a completely unnecessary item in the subdued light of the dispensary) and help to package some of the tablets. She readily agreed to the tablet suggestion, but the sun helmet was on to stay! Only gradually did I come to understand why.

Stella was a self-made woman. Although she had only a few years of primary schooling, she had learned to read and speak English. This is an accomplishment in any society. It was especially so for an African woman whose world in village life is a round of cooking, marketing, farming and collecting firewood. A uniform and sun helmet are symbols of those who have had schooling and are capable of filling posts as clerks and officials. Stella's headgear was a sign to the world that she belonged to this illustrious group. We accepted Stella complete with sun helmet from the start.

As I grew to know Stella better, I came to appreciate her initiative and determination. She had a real business sense and the sewing machine represented one aspect of it. During her free time, she took to making baby bonnets, pastel, lacy creations that sold for 50-75¢ each. She arranged with our dispensary carpenter (on company time) to make her a display case, complete with hinged glass door. Then a little girl from town was hired to help her. Each morning the youngster would hoist the two by three foot display case on her head and sally forth to sell Stella's bonnets in market.

Her absorbing interest, however, was the dispensary. She wanted to be a midwife—registered—so that she could open a nursing home and set up a professional practice. She had come to Berekum for that purpose. We explained to her that, as yet, we are not ready to train midwives. Moreover, she did not have the required schooling and was beyond the age to make up the necessary studies. Stella was not convinced by this logic. She thought she knew all there was to know about delivering babies. All she lacked was the license. There was bound to be trouble and it developed quickly.

Sister Camillus discovered that Stella was independently coaching the patients in the labor room contrary to the instructions of Sister Camillus. Moreover, we found out that Stella was not only a good Christian but also an ardent evangelist. There was no objection to her functioning as guest preacher in the Protestant church every Sunday afternoon, but it was quite another thing to have her giving sermons to our patients. Reluctantly, we decided that Stella must go.

The third member of our trio, Sister M. Paula, who had not as yet had to deal with Stella, intervened at this point. We were in the midst of another cook crisis and somehow Sister Paula had to remedy the situation. Stella seemed the answer. We knew she had enough business interests not to need employment with us but, on the other hand, she recognized the value of specialty training. She agreed to stay on as cook *if* Sister Paula would teach her how to bake and decorate wedding cakes! (She had seen the English-style wedding cakes in Konongo and sensed a new market for herself.)

Stella was hired with the understanding that she would learn how to bake pastries. In all justice I had to explain to her that our menus were usually quite simple. We seldom had pastries and

the possibility of wedding cakes in our lives was circumstantially limited. Nevertheless, the arrangements pleased Stella. No sooner had she gotten involved in the world of cookery than her display case, filled with both bonnets *and* cakes, made its appearance in the market.

For the first several weeks everything went well. Stella learned how to make confectioners sugar by pounding ordinary sugar dry and, before long, frosted cakes came into view. One day, Sister Paula stoked the 19th-century iron stove with wood and proceeded to teach Stella how to make a mock-apple pie. Although green paw-paw (papaya) had to be substituted for the apples, plenty of cinnamon, sugar and imagination made it possible to name the end product mock-apple pie. Both Stella and Sister Paula were duly congratulated on their achievement. Stella could not understand our lack of enthusiasm, therefore, when some days later she produced her second mock-apple pie. Since paw-paw was not available, she used cucumbers. "Cut up, they looked the same!"

As the days wore on, Sister Paula's culinary repertoire was gradually exhausted. The three of us had a sense of living on borrowed time. Stella was a pastry cook now. Surely she would—and she did—return to Konongo where, with lace bonnets and frosted cakes, the possibilities were endless.

Stella was a brief bright star in our lives during those early days. She is probably most fondly remembered for the magnificent way she frosted a cake. She is the only person I have ever known who iced not only the top and sides of the cake, but also the bottom!

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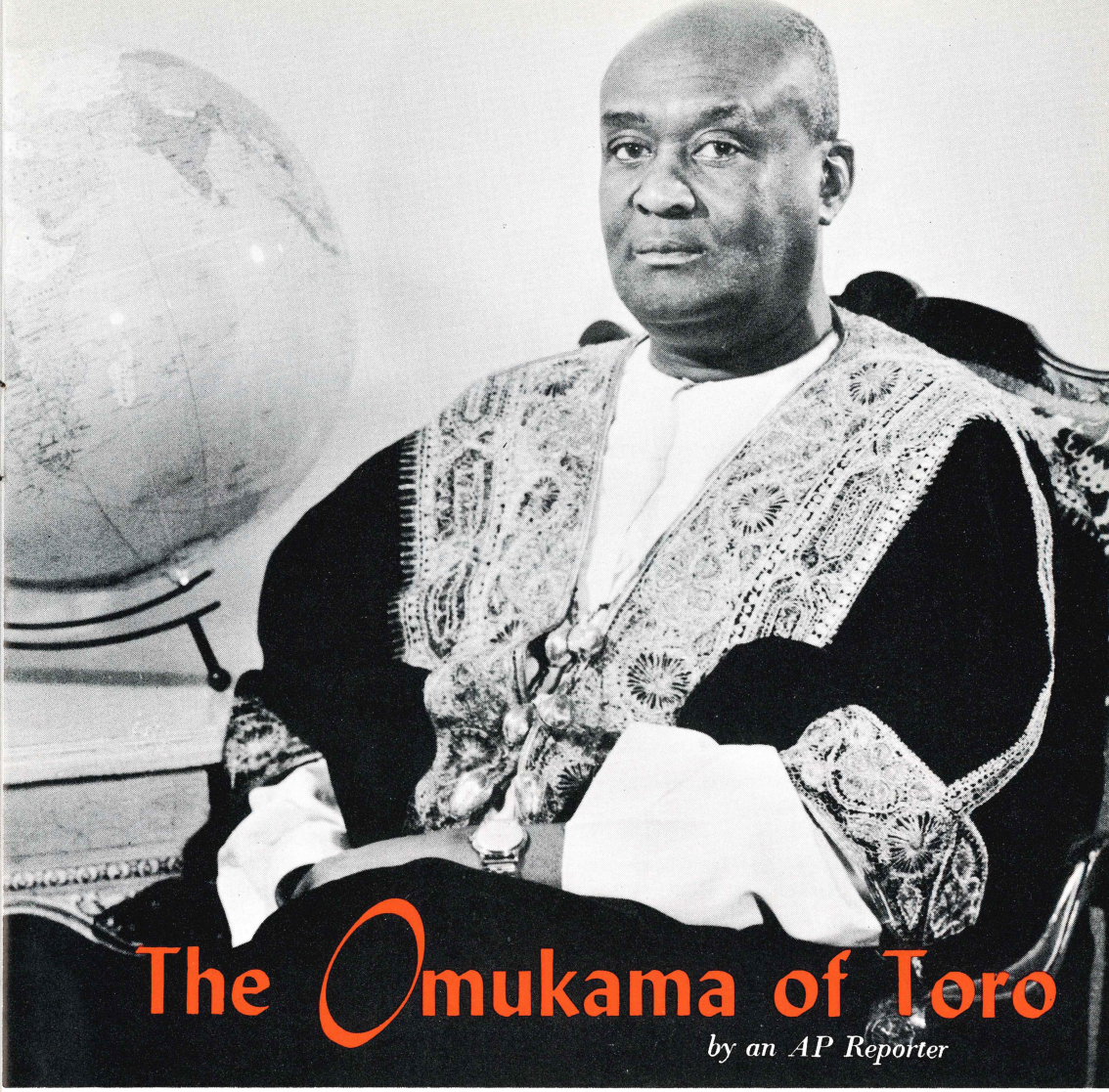

The Omukama of Toro

by an AP Reporter

High on a hill, across from Holy Family Hospital, Fort Portal, is the palace of one of the last of the great African kings.

His Highness, Sir George Kumarasi Rukidi III, the Omukama of Toro, is a link with the exciting East African past. His grandfather and father greeted such African explorers as Henry Morton Stanley and others who visited this remote part of the world in the late 19th Century.

His Highness, Sir George Kumarasi Rukidi III, the Omukama of Toro playing the drum.

The Omukama's kingdom includes such fascinating scenery as the snow-capped Ruwenzori Mountains and the elephant and hippo lands of Queen Elizabeth Park. He is a member of the ruling Batoro tribe but the boundaries of the kingdom of Toro also include the Baamba, Bakonjo, Bakiga, Watusi and Pygmies.

The Omukama is one of four hereditary African kings who still retain their power, to some extent, in independent Uganda. The other kings are: the Kabaka of Buganda in Kampala; the Omugabe of Ankole in Mbarrara and the Omukama of Bunyoro, in Hoima, who is the uncle of the Omukama of Toro.

The kingdoms are like our states in their relationship to the Uganda Central Government. The origins of some of these African kings has been traced back as far as 300 years.

Considered the most powerful of the Uganda kings is the Kabaka of Buganda whose palace overlooks the modern city of Kampala. The Kabaka's predecessors dealt with the British when they took over the country at the turn of the century. Also, the Kabaka's grandfather, Mutesa I, was responsible for the death of the Uganda martyrs. The present Kabaka, Sir Frederick Mutesa II, was recently named president of Uganda by Prime Minister Milton Obote.

King George of Toro reminds the visitor to his palace of an American business executive. He speaks fluent English, with a British accent; dresses conservatively in dark business suits and runs his kingdom from a small office building adjacent to the palace. One of the signs that you are in the presence of a king is the way his subjects greet him. Whether it is a servant or the prime minister of Toro, they all drop to their

hands and knees when in his presence and address him as "Your Highness," in Rutoro, the local language.

King George was educated in England by a private tutor and he has traveled widely in Europe and the United States. On a recent trip to the United States, he stopped off in Detroit and purchased a Cadillac. The sleek, black car cuts quite a figure at state occasions such as the independence ceremonies.

Like any proud father, King George likes to talk about his family. One of his sons, Stephen, is a law graduate educated in England and is now studying at Columbia University, New York. It is expected Stephen will join the Uganda diplomatic corps on the completion of his studies. A daughter, Elizabeth, is studying for a law degree in England and, upon graduation, will be Uganda's first African woman lawyer. Another daughter is a nurse at a hospital in Athens.

A tour of his two-story cement palace recalls to the visitor that you are in the heart of the African big game country. The walls are lined with several trophies of buffalo, Uganda cob and water buck.

"I shot them all myself on hunting expeditions," the king said.

The view from the Omukama's hill is magnificent. Behind you are the Mountains of the Moon; to the left you see the little village of Fort Portal and to the right, high on its own hill, is Virika Mission with its more than 70 buildings including the Cathedral, the diocesan headquarters, Holy Family Hospital, elementary and high schools. Directly in front of you is Namirembe, the Protestant Cathedral and their school grounds.

The king is also a knight. Two years ago he was knighted in Buckingham Palace by Queen Elizabeth. The citation of his knighthood is one of his fondest possessions and rests in a glass case in his living room.

Another proud possession are pictures, on the wall of the living room, of the king with Pope Pius XII and Pope John XXIII. The king had audiences with the popes on his visits to Rome.

One of the main interests of the king at the present time is his new palace which is rising in front of the old one. It is a two-story, cement, cylindrical structure and is expected to be completed soon. The construction progress of the new palace can be watched for miles around in Fort Portal because the Omukama's hill is the highest one in the area.

In January of 1963 the king was the guest of the Sisters at "open house" at Holy Family Hospital. He thanked the Sisters for coming to Fort Portal and to his kingdom of Toro and said he was sure the efforts of the Sisters would raise immeasurably the health standards of the people.

YOUR WILL +

Your will can help the Medical Mission Sisters bring Christlike charity through their medical work to areas of greatest need around the world. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of $_____ for its purposes,"

If you have already made your will, it is not necessary to make a new one. It is sufficient that a codicil be added, using the above.

Encounter . . . is a word . . . . . .

that means two,
a word that means time, a moment of mutual discovery.

It marks a difference of before and after, a sudden thing, unplanned and unrehearsed.

Encounter has no existence of its own, makes no attempt to identify the two, asks not for signs of equality.

Its demand is single—that one be open-faced, bared to meet and to be met.

A man can encounter God. A man can encounter another man.

Every day can be one of encounter for a missionary.

NEWS FROM OUR HOUSES

VIETNAM

A Newcomer's Reaction

I wish I could go into detail about our hospital here in Quinhon. Things are always so different from what you expect them to be. The OPD is really the interesting place, the best spot to get to know the people and the language. There is so much variety in the village people's way of talking, different from that of the city folk. One must change one's pronunciation completely in order to be understood. Vietnamese grammar is relatively simple. Pronunciation is the hard thing, although the linguistics course we had in the Juniorate helped a great deal. It is so easy to sing the wrong tone too and end up with a completely wrong word. The word for "dirty" and the one for "busy" have the same spelling but a different tone. One day, I told a man that Sister Superior was

Sister M. Rosalie chats with two Vietnamese children.

dirty instead of busy. The words for "sickness" and "religion" also look the same. You can imagine the interesting combination of answers you get if you mix up those two!

Sister M. Rosalie
Holy Family Hospital, Quinhon

INDIA

Sour Balls and Feeding Tubes

The little girl, Shanti, had a spontaneous pneumothorax. We had to place a needle in the upper chest and attach it to a drainage tube. Here she is, after the emergency is over, ready to take a hard candy. It takes a brave little girl to smile after so much illness. She had typhoid pneumonia, too, and came to us, after a month of fever, all skin and bones. She never could get enough "sour balls." We could have used the whole Charms factory right over here for Shanti.

RH babies are rare here and we seldom have the opportunity to do an exchange transfusion. Last year, we had only two RH negative mothers deliver out of a total of 715 deliveries. Our most interesting problem recently was a baby with erythroblastosis due to A-O blood incompatibility. We did an exchange transfusion by means of infant plastic feeding tubes. The baby responded nicely and went home cured. Interestingly enough, the biggest problem was not the transfusion but to get the people to understand the need for it and to recruit a donor. The child came in only a week after I had given the nurse-midwives a class on erythroblastosis, so it was a timely practical demonstration.

Sister M. Frederic, M.D.
Holy Family Hospital, Patna

Sister M. Esther gives Shanti a piece of candy as the little girl's mother looks on.

Nine Medical Mission Sister novices from the Philippine Islands are greeted by Mother M. Benedict on their arrival in Philadelphia. The nine traveled 10,000 miles to complete their religious formation in this country. The group includes four pharmacists, two graduate nurses, two accountants and a secretary. The training center in the Philippine Islands where these nine novices began their religious formation was established in 1961.

PHILADELPHIA

Award Winner

Mother M. Benedict was the recipient of the La Salle College Alumni Association's Signum Fidei medal for 1964. The medal, established in 1941 and presented annually to an individual for "distinguished achievement in the advancement of Christian principles," derives its name from the motto of the Brothers of the Christian Schools—"Sign of Faith." Mother M. Benedict is the second woman to receive the medal. Mrs. Edward V. Morrell, benefactress of Negro and Indian missions, was the 1945 medalist. Among the previous recipients are Denis Cardinal Dougherty; Bishop Fulton J. Sheen; Doctor Francis J. Braceland, psychiatrist; Martin H. Work, Executive Director of the National Council of Catholic Men; and R. Sargent Shriver, Director of the Peace Corps.

WASHINGTON, D. C.

Religious Vows

Sister M. F. Pauline Yadava who is 8000 miles from her homeland, India, made her Perpetual Vows in our House of Studies' chapel here in the nation's capital. Sister, a nurse-midwife, is a

graduate of our training school in Patna, India, where she studied before entering the Society. After completing her novitiate in Poona, she worked for a time in Holy Family Hospital, New Delhi. In 1961 she came to the U.S. for further studies, beginning her work at Trinity College, and is presently enrolled at Catholic University.

INDIA

A Good Time Was Had by All

Let me tell you about our employees' Christmas party which was held on the feast of the Holy Family this year. Long before the event, I called our three top men into the office and told them that I thought that they should be responsible for the entertainment. The nurses were planning the games and the Sisters were taking care of the food, so the employees should contribute something too. They did a bit of head shaking, looked at each other, and very reluctantly agreed to see what could be done.

For weeks, I would discover small groups of men standing in the coal bins or in the garage or even seated in the back of a parked truck. When I approached, they would hide their papers and act just like newborn babes that always stand in coal bins! If I asked them what they were doing, they would smile and say that "we were just talking." When I would officially call the Big Three to ask them how things were going, they would ask if I still wanted them to put on a drama. They honestly looked like the prophets of doom.

The long-awaited day finally arrived. The children were supposed to come at 2:30 P.M. for the games. The oldsters were scheduled to play a little later in the day. Some of the little ones were at the gate right after the 7:30 A.M. Mass and remained swinging on it until 2:30! At 2:30, I called them all together. They reminded me of little dolls in their new Christmas clothes. We are certainly indebted to all of our friends back home for sending the clothes and the small prizes which mean so much to the children. One little girl received a dress that was about six sizes too long for her (my mistake in selection), and when I offered to exchange it, she ran to her mother and burst into tears. She liked it that way. In addition, it had a sailor-boy collar with stars on it. Since I didn't have the same style dress sizes smaller, I told her to keep it. She smiled sweetly and swept past with her dress dragging in the dust like a run-away debutante.

This year we decided to show the children how to play dodge-ball. This would certainly warm up everyone's spirits before we settled down to the more complicated games. Several of the Sisters and a few of the nurses showed them just what to do. The little boys caught on to the game very quickly and refused to stop when the nurses announced that they were ready to begin the contests. They seemed to take great delight in trying to knock each other's heads off! I think that we will have to supply football helmets if we play that again next year.

The men are the ones who make me laugh the most. They sit on the sidelines and look as solemn as high court judges. Each year we have to practically drag them out onto the field when their turn comes to play. Once they get started, however, they do not want to sit back down. We had to repeat the tug-o-war three times, as someone always decided that one team was off sides or was not ready when we said "go." This decision was repeatedly made when the prize, a bag of candy,

had been awarded to the winning side. It ended up that we had no losers!

Next came the big supper. This is one of the events of the year. We had killed a big pig the day before and Sister M. F. Agnes had worked hard, along with her employees and volunteer nurses, to produce tubs and tubs of pork curry and well over eight big baskets of cooked rice. One hundred and sixty pounds of dry rice turns into quite a bit of cooked rice, believe me!

The next step in the course of events was the "drama" which was, in fact, a variety show. It was most enjoyable and some of the hidden talent that came to light was amazing. The boys had practiced on musical instruments which they had borrowed from the parish, and they gave a good rendition of a national defense song.

The part that captivated the audience came at the end. It showed the Indian soldiers fighting the Chinese army and throwing them out of India. Brise, our jack-of-all-trades, told me not to be surprised or afraid when the scene came on stage. He said, "Sister, it is all done with tricks." I did not understand what he meant, so he explained that there would be "thousands of Chinese and much fighting to show the people what is going on in the Northeast Frontier."

Well, bless us, if three Indian soldiers (that was all the uniforms they could borrow) didn't chase away "thousands of Chinese." The program was held in the nurses' recreation room which has a multitude of windows opening into a courtyard, a veranda, and a large dormitory. The "Chinese" came in from one window, were shot, and died only after they had plunged through another window. Then they dashed around behind stage and came in again through another window. The whole time, someone in the background was setting off firecrackers while someone else beat on a fifty-gallon petrol tin—just for atmosphere! The whole affair was a grand success and our actors gloried in the many congratulations bestowed upon them by everyone.

You probably think that the evening ended here. It should have! . . . but no, the youngsters brought out their big drums and started the typical Adibasi dancing. Where they found the energy, I'll never know.

Sister M. Pascal
Holy Family Hospital, Mandar

✝ R.i.p.

Please pray for our deceased benefactors:

✝ **John Fitzgerald Kennedy, President of the United States** ✝
Most Rev. Leo R. Smith, D.D., Ogdensburg, N.Y. ✝ Msgr. Charles P. Bruehl, Ph.D., Philadelphia, Pa. ✝ Rev. John A. Devers, C.S.C., Notre Dame, Ind. ✝ Rev. John LaFarge, S.J., New York, N.Y. ✝ Rev. Philippe Normand, Three Rivers, Quebec, Canada ✝ Bro. Lambert Barbier, C.S.C., Notre Dame, Ind. ✝ Bro. Albinus Butler, C.S.C., Notre Dame, Ind. ✝ Bro. Maximus Czyzewski, C.S.C., Notre Dame, Ind. ✝ Bro. Bernard Gervaise, C.S.C., Spokane, Wash. ✝ Rev. Mother Mary Spallen R.S.C.J., Torresdale, Pa. ✝ Ngo Dinh Diem, Saigon, So. Vietnam ✝ Mrs. Julia Henry, Baltimore, Md. ✝ Mr. Donald Lynn, Jamaica, L.I., N.Y. ✝ Mrs. Paul R. McCutcheon, Sr., Lakewood, Ohio ✝ Mr. Joseph Shelton, Central Falls, R.I. ✝ Mrs. Mary Farkas, Budapest, Hungary ✝ Rev. James Haggerty, S.J., Philippine Islands.

Chester Bowles, who is newly returned as American Ambassador to New Delhi, finds that India is actually making impressive headway. He reports in the New York Times Magazine a series of major accomplishments within the past decade. Industrial production has doubled, with steel output three times, and electric power four times, what it was in 1953. Output of many key products is substantial, and the foundations of a modern industrial state are in the making.

During the past ten years food-grain production has increased by half, with better farming techniques slowly spreading and twenty million more acres under irrigation. On the average the people of India have improved their diet by two hundred calories a day. This, with the successful conquest of malaria and other medical advances, has reduced infant mortality and raised the average life span from twenty-seven to forty years.

Mr. Bowles finds the progress of Indian education a most hopeful indication. The steady reduction of illiteracy and the matriculation each year of hundreds of capable doctors, teachers, and engineers (even nuclear experts) assure increasing internal stability — which is based on a background of British civil service and has been manifest in the successful conduct of national and state elections. Because of its potentialities as a counterweight to Communist China, the future of democratic India is of great moment to the world. It is responsible for the well-being of over four hundred million people. Its recent progress should answer the requirements of the most vehement advocate of highly selective foreign aid.

COMMONWEAL, November 22, 1963, p. 244

THE SOCIAL STRUCTURE OF ISLAM, by Reuben Levy, an oriental scholar, published by Cambridge University Press, contains 500 pages of well organized facts in which "the basic principles of Islam are examined and an attempt is made to ascertain how Muslims of different periods and climes have adapted their way of life to them." The subject spans twelve centuries, and the book represents the learning of a lifetime—in a paperback edition for $2.95.

Reverend Dominique Pire, O.P., whose work for the homeless won for him the 1958 Nobel Peace Prize, is in the States lecturing about his University of Peace in Belgium and Island of Peace

program in East Pakistan. The following are excerpts from an article by him printed in the Catholic Reporter.

"Placing face to face the two great scourges of the world—disunity and famine—we could see one being solved by the other, all men and all groups uniting to fight together against famine and this fight in common against famine would lead to the disappearance of disunity among men . . . God, King of heaven and earth, only allows some of His children to live in hunger and sickness, in the hope that all the others will open the eyes of their hearts, go out from themselves, and share their bread and their life.

Consequently the path leading to fraternal dialogue will be as follows: no longer merely a superficial contact, no matter how friendly; but the decision to work together, no matter how different we may be . . .

This work in common, if it is to produce profound results for peace, can only be for the relief of some very great and deep misery. . . . The misery, no doubt, will obscure a little the horizon of our lives, it will demand much inconvenience of us. But in doing so, it will give a sense of life to all those who will inconvenience themselves."

CATHOLIC REPORTER, October 11, 1963

We are not Christians for ourselves alone, but also for others, in order to save our brethren. All Christians are in fact called to spread their Faith by helping the missionaries in charge of founding the Church. Let no one be afraid, no one inactive, no one indifferent, no one idle, no one a parasite. Rather, let everyone take up service and be active for the Kingdom of God."

Pope Paul VI

Dr. Denis Burkitt is a senior government surgeon based at Kampala, Uganda. In a talk to the American College of Surgeons he said that circumstantial evidence continues to pile up that malignant lymphoma, the most common children's cancer in tropical Africa, is virus caused. The disease is practically endemic among children aged one to fifteen. Adults who move from lymphoma-free areas to regions where lymphoma is prevalent among children are beginning to present the disease in numbers never seen in the native adult population.

Dr. Burkitt said there was "strong reason to make an analogy" between this type of lymphoma incidence and the situation that once eixsted with polio. Populations in poorer areas were exposed to it as children and thus had immunologic defenses against the virus by the time they reached adulthood.

Of 60 patients that he has treated 20 are alive "that I know of" four months to three and a half years later. "Follow-ups are a little difficult . . . they disappear into the bush."

In his work on geographic distribution of the disease, Dr. Burkitt found that "Lymphoma incidence is dependent on altitude, temperature, rainfall, and vegetation — it's an environmental cancer."

The agent has still not been found but Dr. Burkitt noted that other investigations have isolated the mosquito-borne virus that causes another disease with almost identical distribution. "It is hard," he says, "not to imagine that the lymphoma is spread the same way."

There are teams from three nations in Africa "trying to be the first to find virus in a human malignant tumor."

Condensed from MEDICAL TRIBUNE, November 25, 1963

THE BURNING BUSH: a sign:
this chosen place is holy,
its Visitor divine.

A young girl's simple Message
lays the whole of worldly wisdom waste.

Her One Articulate Desire
is forged to a single Word
and everything is fire
branded
eternally

with her unique virginity.
This burning is the love-light of the chaste.

Who is she whose integrity is manifest
in flame?
What virgin mother?

MARY is her name.

Sr. Miriam Therese, S.C.M.M.

OLD TESTAMENT SYMBOLS OF OUR LADY
(see EXODUS 3:2-6)

We just had the BEST IDEA about how to ask you to help us build a new nurses' home in Berekum, Ghana. but....We went blank when it came to expressing it.....

Dear Sisters — How sorry I am that your wonderful idea will never be seen in print. Do let me help you to build a new nurses' home in Berekum, Ghana. Here is my $_____

NAME_____

STREET_____

CITY_____ STATE_____

MEDICAL MISSION SISTERS
Philadelphia 11, Pa.